

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila
 District of _____
 Town of Hayden
 or _____
 City of _____

BUREAU OF VITAL STATISTICS
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 173
 Co. Registrar No. _____
 Local Registrar No. 65

No. _____ St. _____ Ward) _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Alfredo Quintana (If child is not yet named, make supplemental report, as directed)

3. Sex of child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other. 5. No., in order of birth. 6. Legitimate? Yes 7. Date of birth 8/16/25 (Month, day, year)

8. Full name FATHER Miguel Quintana

14. Full maiden name MOTHER Maria Baldenegro

9. Residence Hayden
 (Usual place of abode)
 If nonresident, give place and State

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 (Usual place of abode)
 If nonresident, give place and State

10. Color or race Mex 11. Age at last birthday 27 (Years)

16. Color or race Mex 17. Age at last birthday 21 (Years)

12. Birthplace (city or place) Mex.
 (State or country)

18. Birthplace (city or place) Arizona
 (State or country)

13. Occupation Blacksmith
 Nature of Industry Helper

19. Occupation House wife
 Nature of Industry

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 2 (b) Born alive but now dead 0 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 11 p.m. on the date above stated.
 (Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Dr. R. Winslow M.D.
 (Physician or midwife)

Address Hayden, Ariz.

Given name added from a supplemental report _____
 (Month, day, year)

Filed Aug 25, 1925 Local Registrar, _____

Filed _____, 19____ County Registrar, _____

Registrar, _____

County Registrar, _____

181-816-426